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JUN 16 2006

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07303 7590 03/15/2006

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<i>Frank J. Catalano</i>	(Depositor's name)
<i>[Signature]</i>	(Signature)
<i>6/13/06</i>	(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/805,772	03/22/2004	Michael L. Creekmore	006429.00004	1232

TITLE OF INVENTION: MACHINIST'S ACCURACY TESTING TOOL

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	YES	\$700	\$0	\$700	06/15/2006
EXAMINER	ART UNIT		CLASS-SUBCLASS	06/15/2006 TBESHAW2 00000096 501971 10005772	
FULTON, CHRISTOPHER W	2859	033-533000	01 FL:2501 02 FC:0001	700.00 DA 30.00 DA	

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
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2. For printing on the patent front page, list

- (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,
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Frank J. Catalano

2 _____
 3 _____

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government

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- Issue Fee
 Publication Fee (No small entity discount permitted)
 Advance Order - # of Copies 10

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 The Director is hereby authorized to charge the required fee(s), or credit any overpayment, to Deposit Account Number 501971 (enclose an extra copy of this form).

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- a. Applicant claims SMALL ENTITY status. See 37 CFR 1.27. b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2).

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Date

6/13/06

Typed or printed name

FRANK J. CATALANO

Registration No.

25836

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